

Subpart B—New Drug or Prescription Status of Specific Drugs

§ 250.100 Amyl nitrite inhalant as a prescription drug for human use.

(a) Amyl nitrite inhalant has been available over-the-counter for emergency use by the patient in the management of angina pectoris for a number of years. As a result of a proposed policy statement published August 25, 1967 (32 FR 12404), the Commissioner of Food and Drugs received reports of the abuse of this drug by those who do not require it for medical purposes. Additionally, comment included a great deal of concern expressed by individual physicians, medical associations, pharmaceutical associations, manufacturers, and State and local health authorities. Based on the information available, it is the opinion of the Commissioner of Food and Drugs, concurred in by the Food and Drug Administration Medical Advisory Board, that amyl nitrite inhalant is a drug with a potentiality for harmful effect and that it should be removed from over-the-counter status and restricted to sale on the prescription of a practitioner licensed by law to administer such drug.

(b) Therefore, amyl nitrite inhalant will be regarded as misbranded unless the labeling on or within the package from which the drug is to be dispensed bears adequate information for its safe and effective use by physicians, in accordance with § 201.100(c) of this chapter, and its label bears the legend "Caution: Federal law prohibits dispensing without prescription."

(c) Regulatory proceedings may be initiated with regard to the interstate shipment of amyl nitrite inhalant that is labeled, advertised, or dispensed contrary to this statement of policy if such act occurs after July 1, 1969.

§ 250.101 Amphetamine and methamphetamine inhalers regarded as prescription drugs.

(a) Recurring reports of abuse and misuse of methamphetamine (also known as desoxyephedrine) inhalers show that they have a potentiality for harmful effect and that they should not be freely available to the public through over-the-counter sale. From complaints by law-enforcement offi-

cials, health officials, individual physicians, parents, and others as well as from Food and Drug Administration investigations, it is evident that the wicks from these inhalers are being removed and the methamphetamine they contain is being used as a substitute for amphetamine tablets. Amphetamine tablets and amphetamine inhalers have been restricted to prescription sale because of their potentiality for harm to the user.

(b) It is the considered opinion of the Food and Drug Administration that, in order to adequately protect the public health, inhalers containing methamphetamine or methamphetamine salts (d-desoxyephedrine, or dl-desoxyephedrine, or their salts), as well as amphetamine inhalers should be restricted to prescription sale and should be labeled with the legend "Caution: Federal law prohibits dispensing without prescription."

§ 250.102 Drug preparations intended for human use containing certain "coronary vasodilators."

(a)(1) The Food and Drug Administration finds that the following "coronary vasodilators" are extensively regarded by physicians as safe and useful as employed under medical supervision for the management of angina pectoris in some patients:

Amyl nitrite.
Erythrityl tetranitrate.
Mannitol hexanitrate.
Nitroglycerin.
Potassium nitrite.
Sodium nitrite.

(2) Additionally, new-drug applications have been approved for products containing:

Inositol hexanitrate.
Isosorbide dinitrate.
Octyl nitrite.
Pentaerythritol tetranitrate.
Triethanolamine trinitrate biphosphate (trolnitrate phosphate).

(b) The Food and Drug Administration also finds that there is neither substantial evidence of effectiveness nor a general recognition by qualified experts that such drugs are effective for any of the other purposes for which some such drugs are promoted to the

medical profession in labeling and advertising. In particular, neither clinical investigations nor clinical experience justify any representations that such drugs are effective in the management of hypertension; in the management of coronary insufficiency or coronary artery disease, except for their anginal manifestations; or in the management of the post coronary state, except angina pectoris present after coronary occlusion and myocardial infarction.

(c) Any preparation containing such drugs that is labeled or advertised for any use other than management of angina pectoris, or that is represented to be efficacious for any other purpose by reason of its containing such drug, will be regarded by the Food and Drug Administration as misbranded and subject to regulatory proceedings, unless such recommendations are covered by the approval of a new-drug application based on a showing of safety and effectiveness.

(d) Any such drug in long-acting dosage form is regarded as a new drug that requires an approved new-drug application before marketing.

(e) Any of the drugs listed in paragraph (a) (2) of this section is regarded as a new drug that requires an approved new-drug application. Articles for which new-drug approvals are now in effect should be covered by supplemental new-drug applications as necessary to provide for labeling revisions consistent with this policy statement.

§ 250.103 Thorium dioxide for drug use.

(a) Thorium dioxide is a source of naturally occurring radioactivity that has been used over a period of years as a radiopaque medium. When thorium dioxide is injected, it is permanently stored in the body. Because of its radioactivity, this storage causes scarring and carcinogenesis in the area of storage. There are reports in the medical literature of malignancy and deaths resulting from the injection of thorium dioxide. Therefore, the use in man of drugs containing thorium dioxide is justified only when this drug has a unique clinical usefulness and there is substantial evidence of limited life expectancy by reason of disease or ad-

vanced age. The administration of the drug to food-producing animals cannot be justified since it may result in residues of the drug in food.

(b) Drugs containing thorium dioxide are unsafe and are regarded as misbranded within the meaning of section 502(f) (1), (2), and (j) of the Federal Food, Drug, and Cosmetic Act when labeled or advertised for administration to man except when they have a unique clinical usefulness and there is substantial evidence of limited life expectancy by reason of disease or advanced age.

(c) Drug preparations containing thorium dioxide may be approved for marketing on the basis of new-drug applications containing labeling bearing, in addition to other requirements, information to the following effect, which differs substantially from the labeling that has been employed in the past in the marketing of such drugs:

(1) *Warning.* For use only when this drug has a unique clinical usefulness and there is substantial evidence of limited life expectancy by reason of disease or advanced age. Not for administration to food-producing animals.

(2) *Precautions.* Special precautions should be taken to prevent soft tissue extravasation of the injected material. Precautions should be taken to prevent injection of thorium dioxide into the subarachnoid space.

(3) *Indications for use.* For demonstration of primary or secondary tumors in the liver; for the delineation of the wall of a cystic malignant brain tumor when such delineation is deemed advantageous for purposes of progressive monitoring in the course of therapy.

(4) *Dosage.* Minimum amount necessary for adequate visualization should be utilized.

(d) A new drug application will be regarded as approvable if it contains appropriate labeling conforming to the provisions of paragraph (c) of this section and satisfactory information of the kinds required by § 314.50 of this chapter.

[40 FR 14033, Mar. 27, 1975, as amended at 55 FR 11577, Mar. 29, 1990]

EFFECTIVE DATE NOTE: At 62 FR 12084, Mar. 14, 1997, § 250.103 was removed, effective Apr. 14, 1997.